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Typhoon Slams Guam, Damaging Naval Hospital
From Bureau of Medicine and Surgery Public Affairs
GUAM - Super Typhoon Pongsona slammed into Guam
earlier this week with weather telemetry instruments
registering winds of 170 miles per hour before they
broke.

The typhoon was more severe than expected, catching many Guam residents unprepared. U.S. Naval Hospital Guam, generally better and more completely ready than civilian facilities, is nonetheless still recovering.

The "soft" part of the hospital's roof was almost completely blown away. Many windows and doors were blown out, and there is some water damage inside the building. The air conditioning and refrigeration is barely working, causing worries about stored blood, vaccines, chemical reagents, and other materials and equipment that require constant cool temperatures. Since the island is without power, the hospital must provide its own power; as of Wednesday, one of its two generators was out of commission.

Despite these problems, the hospital remains open, but as of mid-week was still not seeing routine ambulatory patients. It's emergency room never closed.

The island's one civilian hospital, Guam Memorial, was severely damaged, with some walls collapsing. Its intensive care unit patients and in-patients have been transferred to the naval hospital.

One naval hospital staff member was cut by glass

during the clean up. Another sustained a fracture during the storm. Island-wide, one of the most common injuries is embedded glass.

Aid is on its way to the island from numerous sources, including U.S. Naval Hospital Yokosuka, Japan.
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Yokosuka Hospital Rushes to Aid USNH Guam By Bill Doughty, U. S. Naval Hospital Yokosuka Public Affairs

YOKOSUKA, Japan - From an e-mail request to a fully loaded truck, it took less than five hours to get 4,500 pounds of emergency medical supplies ready to help U. S. Naval Hospital Guam, damaged this week by a super typhoon. Lt. Alex Taag, Medical Service Corps, and a crew of hospital corpsmen collected, boxed, and prepared the supplies for Guam, declared a federal disaster area in the wake of Typhoon Pongsona.

"Parts of the island were flattened," said Taag, the head of Yokosuka's materials management department. "Infrastructures were severely damaged. We were notified by U. S. Pacific Fleet Command that Guam needed help."

The Yokosuka Hospital team prepared 14 huge "tribox" containers, packed with linen, towels, medical supplies, and lots of batteries.

"Our supply inventory is designed to support Naval Hospital Yokosuka for an extended period of time. Contingencies are incorporated in the supply ordering system," said Taag. "Whatever supplies we have provided to Guam we will reorder right away to cover future needs."

Taag said a team effort made it possible for a quick reaction to a sister naval hospital in need.

"I credit my staff, most especially the inventory and medical logistics division and the receiving section, headed by Chief Hospital Corpsman (Vincente) Pasetes," said Taag. "Also, for the help of medical hold staff and other hospital staff. Overall, it's (U.S.) Naval Hospital Yokosuka coming together to make things happen."

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Carl Vinson Corpsmen Save Shipmate's Life By Journalist 3rd Class (SW/AW) Mat Sohl, USS Carl Vinson

ABOARD USS CARL VINSON, At Sea - What began as a peaceful routine evening meal in USS Vinson's galley took a drastic turn recently when, after eating, one young Sailor slipped into anaphylactic shock, losing consciousness.

Had it not been for the quick thinking of two Carl Vinson hospital corpsmen, the allergic reaction could have taken the Sailor's life.

Hospital Corpsmen 3rd Class Henry Stephens and Phil Fotia were in the mess line when they noticed something wrong.

"Out of the corner of my eye, I caught two guys carrying somebody," said Stephens. "It looked like they were carrying dead weight."

The two corpsmen rushed to the group of panicked Sailors who were holding their shipmate. Stephens quickly realized the severity of the situation.

"When someone is suffering from anaphylactic shock, their airway swells up and closes as if they were choking," said Lt. Cmdr. Daniel Hohman, Medical Corps, Carl Vinson's senior medical officer. "Another two or three minutes' delay in getting him to medical would have cost the Sailor his life or caused him serious brain damage."

Stephens established the Sailor had just finished eating fish and was most likely suffering from an allergic reaction.

"The training we had in 'A' school just sort of took over," said Fotia. He cleared a path from the mess decks to medical, allowing Stephens and other Sailors to carry the suffocating victim.

Once in medical, Stephens and Fotia placed the ailing Sailor on the treatment table and began treatment. Fortunately, several other hospital corpsmen and medical officers were already there, treating a Sailor who had broken his arm earlier in the evening.

"A lot of things lined up perfectly that evening," said Hohman. Additional medical personnel, coupled with Stephens' accurate evaluation of the crisis, allowed for quick proper treatment. The patient was given an epinephrine shot, which counteracted the allergic response and relieved the swelling in his throat.

It wasn't until later that evening that Stephens realized that his and Fotia's action might have made the difference between life and death.

"After we got done, Fotia turned to me and said, 'You know that you saved that guy's life, right?'" said Stephens.

Two days later, at an impromptu ceremony held on the aircraft carrier's forecastle, the ship's Commanding Officer, Capt. Rick Wren, presented Stephens and Fotia with the Navy/Marine Corps Achievement Medal.

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Pensacola Sponsors Health Excellence and Fitness Symposium

From Naval Hospital Pensacola, Fla. Public Affairs
PENSACOLA, Fla. - The 6th Annual Health Excellence
and Fitness Symposium, to promote improved quality of
life and fitness, will be held Feb. 18-20, 2003 at Naval
Air Station Pensacola.

Keynote speakers will include renowned fitness

expert Dr. Kenneth Cooper from the Cooper Institute for Aerobics Research in Dallas; Dr. Martin Collis, a consultant with the President's Council on Physical Fitness; and other internationally known specialists.

Workshops will be held on such issues as asthma and air pollution, tobacco use and secondhand smoke, sports injury prevention, and cardiovascular medicine. Continuing education credits are available.

Sponsors of the event include Naval Hospital Pensacola, Naval Aviation Schools Command, and local Florida colleges and associations.

For additional information and to register, visit the symposium website at www.healthexcellencepensacola.com, or call (850) 452-3801.

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Bremerton is "Wired in the Military" - Four Times Over By Roberta Robertson, Naval Hospital Bremerton, Wash.

BREMERTON, Wash. - When Hospitals and Health Networks published its Most Wired-Four Time Winners, nestled in the center of the list of 19 hospitals and healthcare systems was Naval Hospital Bremerton - the only military hospital listed.

The hospital has had bragging rights as the magazine's "most wired" for four years in a row, identifying its leaders and best practices as worthy of being shared with other organizations.

At Bremerton, being wired means enabling clinicians to quickly click and search through information with one or two keystrokes when in the past it might have required a dozen or more.

Their system has also added a query capability. According to hospital commanding officer Capt. Christine Hunter, Medical Corps, it's now easier to manage the health of patients, instead of simply treating an episode of illness.

One example used is that it's now possible to check how many diabetic patients haven't been back for their blood work in the past year with just a few keystrokes. Not so long ago, Hunter said, she wouldn't have had an easy way to do that.

According to the hospital's chief information officer, Patrick Flaherty, this improved patient management is already proving beneficial. In the case of the diabetic patients, more are getting their lab work done quickly and measurements such as hemoglobin levels have overall been improving -outcomes that he said are largely attributed to better information management.

Hunter said it was interesting to see how the technology can be used.

"I was used to using IT for business processes and documentation," Hunter told the magazine. "Seeing it

used to improve patient safety and health outcomes was a surprise."

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Manual Can Help You Improve Fitness, Prevent Injury By Brian Badura, Bureau of Medicine and Surgery

PORTSMOUTH, Va. - Good training programs are designed around a comprehensive plan providing information to guide every step of the way. Personal fitness regimens should have a plan as well.

The Navy Environmental Health Center (NEHC)
Portsmouth recommends the "Force Health Protection:
Nutrition and Exercise Resource Manual" as a
comprehensive guide for nutrition and fitness.

"It was published by the Department of Military and Emergency Medicine at Uniformed Services University of the Health Sciences (in Bethesda, Md.) in 1999, and presents a wealth of evidence-based fitness information," said Diana Settles, program manager for injury prevention and fitness at NEHC.

The manual begins with an overview of how the body produces and uses energy, as well as some basics on nutrition. The bulk of the information covers physical exercise, with topic areas including flexibility, cardiovascular exercise and strength training.

With Sailors and Marines training in diverse environments ranging from submarines to deserts to carrier decks, the manual also focuses on rounding out your knowledge to keep you healthy. For example, it breaks out specialized topics such as training in diverse climates; training for women; and the relationship between age and performance.

Beginners and seasoned fitness fans alike will benefit from the wealth of information in the manual to help maintain optimum performance. The manual can also help you meet those upcoming holiday resolutions to get in shape.

To check it out, visit the NEHC web site at www-nehc.med.navy.mil/hp/nutrit/forcehealth.htm.

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Navy Medicine Featured in Denzel Washington's "Antwone Fisher"

From Bureau of Medicine and Surgery Public Affairs
WASHINGTON - "Antwone Fisher," Fox/Searchlight
Productions movie about a Sailor whose future is saved
thanks to the care of a compassionate Navy psychiatrist,
will premiere Dec. 20 at theaters across the nation.

Navy Medicine professionals on the East and West coasts assisted in the movie's production, offering technical expertise and tours of facilities to director Denzel Washington and production staff.

Cmdr. Richard Delaquis, of the Bureau of Medicine's Reserve Affairs, went to an advance screening of the

movie in Washington, DC, last week. He gives the movie good reviews.

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Charleston Lights Tree with Burns Elementary By Roberta Neighbors, Naval Hospital Charleston, S.C.

CHARLESTON, S.C. - Naval Hospital Charleston and its partner in education, Burns Elementary School, kicked off the holiday with the lighting of the angel tree earlier this week.

The angel tree holds the names of children who would benefit from receiving a holiday gift. Volunteers pick a name and donate a gift to the child.

Capt. Margaret Allard, Nurse Corps, the hospital's commanding officer, welcomed school principal Bonnie Olsen and assistant principal Amy Mims to help kick off the angel tree by lighting the tree at the hospital.

The hospital staff spends more than 150 hours a year at the elementary school mentoring, tutoring and helping with special projects.

"If I can make a difference for one child, it will be a good day," said hospital volunteer coordinator Leamon Saunders.

The goal is to get each of the more than 500 students a small gift to let them know how much they are appreciated. This year, hospital patrons have joined the staff in the gift drive. The Navy Exchange is also assisting with pre-selected gifts should patrons want to donate money rather than shop.

The staff has volunteered to wrap or shop if a cash donation is made to make it easy for givers. This is the first year for the gift drive and "Team Charleston" hopes it will become an annual tradition.

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"Sound of Music" Family Sings For Portsmouth Medical By Journalist 1st Class Daniel A. Bristol, Naval Medical Center Portsmouth

PORTSMOUTH, Va. - The sounds of Christmas came early to Naval Medical Center Portsmouth this year, thanks to the Von Trapp family children doing what they do best - singing.

The Von Trapp children, Sofia, Melanie, Amanda and Justin, are the great grandchildren of Captain and Maria von Trapp of the famous singing family featured in "The Sound of Music." Captain Von Trapp was a submarine captain in the Austrian Navy. The Von Trapp children wanted to sing at Portsmouth to honor the U.S. Navy.

The children who have been singing together for seven years, performed folk songs, spirituals, classical pieces and favorite songs from the movie. Their performances started in 1997 at the Trapp Family Lodge in Stowe, Vt. They have since opened several times for George Winston and sung for international audiences at

the Glacier International Peace Park.

The children also tell stories passed down from the older generation about their lives in Austria and America. They have performed across the country, live, on radio and on television including appearances on Fox News in St. Louis and WGN in Chicago.

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First Person: Lt. Leonard Quincy Oliver, Nurse Corps (Oliver is a staff nurse in the post anesthesia care unit, Naval Hospital Charleston, S.C. These are his words about how the Navy helped him respond to a dire emergency.)

I could see the smoke and brake dust coming out of the vehicle, and knew it was a bad one. The car that got hit had kids in it. I couldn't believe these other cars were driving around this wreck without seeing if anyone was hurt or if they could help.

I parked and went over to the car with the kids. Everything was kind of quick. I was feeling nervous and kind of scared, but my immediate instinct was to help the victims right away. I asked them if anybody had any injuries. The little boy said his shoulder hurt, and the little girl was saying her leg or foot was hurting. I had them lay down and asked if anybody had any neck injuries.

While helping the kids, I saw a familiar face. It was a retired Navy doctor from the hospital. Boy, was I glad to see him. He helped with getting the parents out of the car. I let him know I was taking care of the kids, and immediately I followed his guidance for medical assistance with them. I stayed with them until the EMS (emergency medical service) workers and paramedics arrived. I helped them put the kids on the stretchers and assisted with stabilizing them.

My five and a half years as a Navy nurse really kicked in with this incident. I knew a job had to be done and I didn't hesitate to jump right in and offer medical assistance. I was there doing whatever it took to give the best patient care. Of course, my training, education and knowledge in medical care played a huge role, but the biggest part, I believe, is my instinct for helping and caring for others.

I'm very proud to be a Navy nurse because we have a valuable impact on patient care and we are the direct representation of the medical side of the Navy.

- Interviewed by Aveline V. Allen, Bureau of Medicine and Surgery

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Skilled Technician Behind Anthrax Attacks, Says
CDC Director

By Gerry J. Gilmore, American Forces Press Service
WASHINGTON - Whoever unleashed the anthrax assaults

that killed five people last year is most likely a trained biomedical technician.

That's the belief of the new chief of the U.S. agency responsible for national medical preparedness for biological, chemical and nuclear terrorist attacks.

Dr. Julie L. Gerberding, recently appointed as the director of the Centers for Disease Control and Prevention in Atlanta, told a homeland security conference audience here today that everything changed regarding homeland security after the Sept. 11, 2001, terrorist-hijacked airliner attacks on New York City, the Pentagon and Pennsylvania.

She also pointed out the still unsolved anthrax attacks that began Sept. 18 last year highlighted the nation's vulnerability to yet another potential terrorist weapon: bio-terrorism.

Last year, as acting director of the CDC's National Center for Infectious Diseases, Gerberding played a key role in orchestrating her agency's response to the Sept. 18 - Dec. 8 postal-system-launched anthrax attacks in New Jersey, New York City, Florida, Maryland, Connecticut and the District of Columbia that infected 22 people and killed five.

That the FBI hasn't yet caught the perpetrator of the anthrax attacks isn't surprising, she noted.

"I think it is a huge challenge - in part, because it's (like) looking for a needle in a haystack," she said.

Whoever launched the anthrax attacks possesses "incredible, sophisticated knowledge about what they are dealing with," she continued. "They had to protect not only themselves, but the people in their environs from exposure to the powders, which basically function as a gas."

Gerberding added that the method in which the anthrax attacks were carried out indicates intricate planning and a level of sophistication that suggests the culprit's "not somebody who went in their garage and cooked this up over the weekend."

Since last year's hijacker and anthrax terror attacks, she noted, more than \$900 million has been disbursed through CDC and other U.S. agencies to state and local organizations for homeland security-related missions.

The recent creation of the Department of Homeland Security, she pointed out, should also enhance coordination, communication and planning of national anti-terrorism efforts. In fact, she said, CDC and other agencies are now working to develop a national distribution system for the smallpox vaccine. However, more remains to be done, especially when the perpetrator or perpetrators of the anthrax attacks are at large, she emphasized.

"We haven't caught these people and that tells me

that the alertness and the level of vigilance that has to go on in emergency departments throughout the country has not changed," Gerberding said.

She noted that 12 letters "almost shut down the U.S. Postal system" during the anthrax threat.

"It wouldn't take many more (such) letters to really create an enormous catastrophe. ... Our best defense is to find the (perpetrator of the) first (anthrax) case," she concluded.

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Healthwatch: Aplastic Anemia, Myelodysplastic Syndrome Rare But Potentially Deadly

By Aveline V. Allen, Bureau of Medicine and Surgery
WASHINGTON - Aplastic anemia and myelodysplastic
syndrome are two rare but serious diseases that can
affect anyone, anytime, at any age. Each year the
Aplastic Anemia and MDS International Foundation, Inc.,
sets aside one week to make people aware of this
potentially deadly disease.

Aplastic anemia occurs when your immune system attacks your bone marrow and it stops making enough blood cells.

"Myelodysplastic syndrome happens when the self-renewing cells you are born with, also known as stem cells, acquire damage to the genetic code that provides their instructions for growth and function," said Cmdr. Brian P. Monahan, Medical Corps, the Navy's specialty leader for hematology.

Monahan explained this causes bone marrow to stop making healthy blood cells, and, instead, produce poorly functioning and immature blood cells.

"Anemia is common in both diseases, as are life threatening infections and bleeding problems," said Monahan.

The foundation says there are approximately 1,000 new cases of aplastic anemia each year in the United States, and estimates there are about 10,000 to 20,000 new cases of MDS worldwide each year. Statistics show that the highest incidence of myelodysplasia occurs in persons over 60 years old, while aplastic anemia typically occurs in younger people, although people of all ages, including children, are diagnosed with it each year.

"We will see cases throughout the year of aplastic anemia, many of which will have a good outcome, while myelodysplastic syndrome is much more common and therapy outcomes are not as good," Monahan said.

Symptoms for both diseases include, but are not limited to, weakness, exhaustion, fevers, bleeding associated with cuts or falls, and headaches.

Risk factors that may increase your chances of developing the diseases include exposure to toxic chemicals.

"Benzene in the vapors of gasoline is the most common exposure for most people," Monahan said.

Additional factors are treatment with high-dose radiation or chemotherapy for cancer in the case of myelodysplasia. For aplastic anemia the use of certain over-the-counter and seldom-used prescription drugs have been suspected.

"Rare immune disturbances in hepatitis and pregnancy can also be linked to aplastic anemia," Monahan said.

Medical experts suggest that for many cases aplastic anemia can be treated by destroying certain immune cells, or in severe cases, a bone marrow transplant may be performed, if the person is of young age with a brother or sister that is a tissue match.

In cases of myelodysplasia, experts recommend certain drugs, possible blood transfusions, or antibiotics to fight infections.

"People are served best by prompt medical attention for unexplained bruising or bleeding, fever, fatigue or skin pallor," Monahan said.

Always consult your physician about various diagnoses, treatments and remedies for these diseases.

"Our hope would be to cure most people with aplastic anemia, while we realize that much needs to be done to have better outcomes for myelodysplastic syndrome," Monahan said.

One of the Navy's major referral centers for therapies in Aplastic Anemia is located at National Naval Medical Center Bethesda.

For additional information, see www.aamds.org.
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EDITOR'S NOTE - Navy and Marine Corps Medical News will not be published the weeks of Dec. 22 and 29.